Inventor Information

Inventor One Given Name::   Joan W.
Family Name::   Miller
Name Suffix::
Postal Address Line One::   c/o Retina Service, Massachusetts Eye and Ear Infirmary
Postal Address Line Two::   243 Charles Street
City::   Boston
State or Province::   Massachusetts
Country::   USA
Postal or Zip Code::   02114
City of Residence::   Winchester
State or Prov. of Residence::   Massachusetts
Country of Residence::   USA
Citizenship Country::   CANADA

Inventor Two Given Name::   Evangelos S.
Family Name::   Gragoudas
Name Suffix::
Postal Address Line One::   c/o Retina Service, Massachusetts Eye and Ear Infirmary
Postal Address Line Two::   243 Charles Street
City::   Boston
State or Province::   Massachusetts
Country::   USA
Postal or Zip Code::   02114
City of Residence::   Lexington
State or Prov. of Residence::   Massachusetts
Country of Residence::   USA
Citizenship Country::   USA

Inventor Two Given Name::   Reem Z.
Family Name::   Renno
Name Suffix::
Postal Address Line One::   c/o Retina Service, Massachusetts Eye and Ear Infirmary
Postal Address Line Two::   243 Charles Street
City::   Boston
State or Province::   Massachusetts
Country::   USA
Postal or Zip Code::   02114
City of Residence::   Boston
State or Prov. of Residence::   Massachusetts
Country of Residence::   USA
Citizenship Country::   LEBANON

Correspondence Information

Correspondence Customer Number:: 021323
Electronic Mail::

Application Information

1

Title Line One::   METHODS AND COMPOSITIONS FOR TREATING CONDITIONS OF THE EYE

Title Line Two::
Total Drawing Sheets::   6
Formal Drawings?::   Yes
Application Type::   Utility Patent
Docket Number::   MEE-002
Licensed US Govt. Agency::
Contract or Grant Numbers::
Secrecy Order in Parent Appl.?::

Representative Information

Representative Customer Number:: 021323

Continuity Information

This application is a::   Non Provisional of Provisional
>Application One::   60/181,641
Filing Date::   February 10, 2000
Patent Number::
which is a::
>>Application Two::
Filing Date::
Patent Number::

Prior Foreign Applications

Foreign Application One::
Filing Date::
Country::
Priority Claimed::